

DECLARATION AND POWER OF ATTORNEY

ATTORNEY DOCKET NO. 10006190-1

FOR PATENT APPLICATION Aspa below named inventor, I hereby declare that: My resonce/post office address and citizenship are as stated below next to my name; 21 bear value and the original, first and sole inventor (if only one name is listed below) or an original, first and joints nventor (if plural names are listed below) of the subject matter which is claimed and for which a patents sought on the invention entitled: System For Setting Image Characteristics Using Embedded Camera Tag Information the specification of which is attached hereto unless the following box is checked: ($\frac{1}{2}$ was filed on 7-23-01as US Application No. or PCT International Application (if applicable). and was amended on _____ Number 09/911280 I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above. I acknowledge the duty to disclose all information which is material to patentability as defined in 37 CFR 1.56. Foreign Application(s) and/or Claim of Foreign Priority I hereby claim foreign priority benefits under Title 35, United States Code Section 119 of any foreign application(s) for patent or inventor(s) certificate listed below and have also identified below any foreign application for patent or inventor(s) certificate having a filing date before that of the application on which priority is claimed: APPLICATION NUMBER DATE FILED PRIORITY CLAIMED UNDER 35 U.S.C. 119 COUNTRY NO: YES YES: NO: **Provisional Application** I hereby claim the benefit under Title 35, United States Code Section 119(e) of any United States provisional application(s) listed below: APPLICATION NUMBER FILING DATE U. S. Priority Claim I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application: FILING DATE STATUS (patented/pending/abandoned) APPLICATION NUMBER POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith: Place Customer **Customer Number** 022879 Number Bar Code Label here Direct Telephone Calls To: Send Correspondence to: **HEWLETT-PACKARD COMPANY** Intellectual Property Administration P.O. Box 272400 Fort Collins, Colorado 80527-2400 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. Citizenship: US Full Name of Inventor: Patricia D. Lopez 2019 Wimbleton Court, Loveland CO 80538 Residence: Same as residence Post Office Address:

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

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Full Name of # 2 joint inventor:	Robert E. Sobol		Citizenship: US
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inventor's Signature	<u> </u>	Date	
Full Name of # 3 joint inventor	:		Citizenship: US
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Full Blame of # 4 joint inventor	··		Citizenship:
Full Name of # 4 joint inventor	r:		
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 5 joint invento	or:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 6 joint invent	or:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 7 joint invent	tor:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 8 joint Inven	itor:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	